Form **990-EZ**

Department of the Treasury Internal Revenue Service Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2011

Open to Public Inspection

А	For the	2011 calend	ar year, or tax year beginning , 2011, and ending			, 20			
В	Check if ap	If applicable C Name of organization D Emp			er ide	entification number			
	Address c	dress change UAW OHIO STATE POLITICAL CONTRIBUTING ENTITY			20-8708883				
	Name cha	e change Number and street (or P O box, if mail is not delivered to street address) Room/suite E Tele				elephone number			
Ц	Initial retui	rn		419-893-4677					
닏	Terminate	J.	Crous	roup Exemption					
빔	Amended	•	umber ▶						
		n pending	MAUMEE OH 43537						
		ing Method				f the organization is not			
	I Website: ► N/A required to attach Schedule B								
			, , , , , , , , , , , , , , , , , , ,			D-EZ, or 990-PF)			
	K Check ▶ ☐ If the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally								
			0 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may	be requi	red (see instructions) But if			
	_		ses to file a return, be sure to file a complete return						
L	Add lines	5b, 6c, and 7	b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II,					
_		olumn (B) belo	w) are \$500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$	109,901			
F	Part I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the ir	nstruct	ions	for Part I.)			
		Check If	the organization used Schedule O to respond to any question in this Part I			🗸			
	1	Contribution	ons, gifts, grants, and similar amounts received	.	1	0			
	2		ervice revenue including government fees and contracts	. Г	2	109,901			
	3	_	ip dues and assessments		3	. 0			
	4	Investmen	•		4	0			
	5a		bunt from sale of assets other than inventory 5a	ol	54.44	· -·			
	b		or other basis and sales expenses	0					
	1				5c	0			
	C	,	ss) from sale of assets other than inventory (Subtract line 5b from line 5a) and fundraising events		200 × 3				
	6	_	le e						
a)	a		ome from gaming (attach Schedule G if greater than		1.				
Revenue	!	\$15,000)	<u>[6a]</u>	0	•				
Š	b		me from fundraising events (not including \$ 0 of contributions	l S					
ď	:		aising events reported on line 1) (attach Schedule G if the						
		sum of suc	ch gross income and contributions exceeds \$15,000)	0					
	С		et expenses from gaming and fundraising events 6c	0					
	d		e or (loss) from gaming and fundraising events (add lines 6a and 6b and subt	ract	***				
	ł	line 6c)		· [_'	6d	0			
	7a	Gross sale	s of inventory, less returns and allowances	0					
	b	Less ⁻ cost	of goods sold	0 2	2				
	С	Gross prof	it or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	0			
	8	Other reve	nue (describe in Schedule O)		8	0			
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	▶	9	109,901			
_	10		decirally amounts mad (list in Cobadula O)		10	0			
	11		BEREN (S)		1/1	0			
v.		•	ther compensation, and employee benefits	y -	12	0			
Expenses	13			 (17		0			
ă	14		al fees and other payments to independent contractors \\ \begin{aligned} \begi	} ₫	13	0			
×	15					0			
_	1	Printing, publications, postage, and shipping				32,370			
	16		enses (describe in Schedule O)		16 17	32,370			
_	17		enses. Add lines to through to	+ i	18	77,531			
Ų.	18	Excess or	(deficit) for the year (Subtract line 17 from line 9)		10	77,331			
Ġ.	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)				165 003			
Ă						165,093			
Net Assets	20		nges in net assets or fund balances (explain in Schedule O)	<u> </u>	20	0			
_	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	•	21	242,624			

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

								
Pa	ŕt II 🎺	Balance Sheets. (see the instructions	•					
	•	Check if the organization used Schedule	O to respond to ar	ny question in this				<u>.</u>
					(A) Beginning of			(B) End of year
22		n, savings, and investments			19	4,894	-	242,624
23		d and buildings					23	0
24		er assets (describe in Schedule O)	•	•	10	4,894		242,624
25 26		al liabilities (describe in Schedule O)					26	242,024 N
27		assets or fund balances (line 27 of column	(B) must agree with	 n line 21)		4,894	-	242,624
	tIII	Statement of Program Service Accom				.,		·
		Check if the organization used Schedule				. П	/Da	Expenses quired for section
Wha	t is the	organization's primary exempt purpose?	POLITICAL CONTRI					(c)(3) and 501(c)(4)
as n	neasure ons be	ne organization's program service accomplised by expenses in a clear and concise manefited, and other relevant information for early TO MAKE POLITICAL CONTRIBUTIONS AND	anner, describe the ach program title	services provide	d, the numbe		494	anizations and section 17(a)(1) trusts, optional others)
20	AND I	MPLEMENT POLICIES AND PROGRAMS THAT ITIONS FOR UAW WORKERS AND THEIR FAN	WILL ENRICH THE L	IVES OF AND IMPR				
	(Grant	s\$) If this amount	includes foreign gra	ints, check here	<u> </u>		28	32,370
30	(Grant	s\$) If this amount	ıncludes foreign gra	ints, check here	<u> </u>		29	a
	(Grant		ıncludes foreign gra	nts, check here	>		30	a
31		program services (describe in Schedule O)						
22	(Grant	s \$) If this amount program service expenses (add lines 28a t	includes foreign gra			┢	31:	
	t IV	List of Officers, Directors, Trustees, and Key		h one oven if not on	mnoncated (co			
гаі	C IV	Check if the organization used Schedule				e uie i	nsut	
		(a) Name and address	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISI	(d) Health be contributions to (benefit plans	employ s, and) Estimated amount of other compensation
KEN	LORTZ		DIRECTOR				+	
		DLANDS DR MAUMEE OH 43537	DIRECTOR, VARIES		o		0	0
STE	PHEN K	EMP	ASST DIR, VARIES				Ť	
1691	WOOD	LANDS DR MAUMEE OH 43537	ASST DIK, VANIES		0		0	0
					_		+	
					 		+	
							+	
					-		+	
					_		+	
							-	
			I	l	1		1	

Part	Other Information (Note the Schedule A and personal benefit contract statement requirements	s in th	e	_
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	<u>Part</u>	<u>V</u>	
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		✓
b	If "Yes." to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	<u> </u>	
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	48985°50	√
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			1000
b	Did the organization file Form 1120-POL for this year?	37b	ZAF72	(8)330
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	125	✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved		100	
39	Section 501(c)(7) organizations Enter Initiation fees and capital contributions included on line 9 39a			1.4
a	Third Control of the		. 2	
40a	Gross receipts, included on line 9, for public use of club facilities Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under	12.2		
40a	section 4911 ▶ , section 4912 ▶ , section 4955 ▶		-	
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit	200		10.7
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been	401		
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	P. Shi	Datable
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912,			4.5
	4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c		13	
u	reimbursed by the organization			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		<i>J</i>
41	List the states with which a copy of this return is filed ▶			
42a	The organization's books are in care of ▶ UAW REGION 2B Telephone no ▶	419-89	3-467	7
	Located at ► 1691 WOODLANDS DR, MAUMEE, OH 43537 ZIP + 4 ►	435	37	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	waster -	✓
	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		
C	If "Yes," enter the name of the foreign country	420	<u> </u>	V
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here		I	► □
	and enter the amount of tax-exempt interest received or accrued during the tax year		,	نــا
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	***	1
С	Did the organization receive any payments for indoor tanning services during the year?	44c		√
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	James Control	lail if	¥ 3-
	explanation in Schedule O	44d		<u></u>
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	ļ	✓
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45h	17.	7

Form **990-EZ** (2011)

		•						l Y	es N	O		
46 ,	Did th	ne organization engage, directly or i andidates for public office? If "Yes,"	ndirectly, in political c	ampaign activities	on behalf	of or in opposi	tion			ü		
Part V				<u> </u>	nt charite	blo truete or	J	_46 ·	<u>/ </u>			
· Giv	Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47–49b											
	and 52, and complete the tables for lines 50 and 51.											
		Check if the organization used Sc			ın thıs Par	t VI .						
					_		_	Y	es N	0		
47	Did tl	ne organization engage in lobbying	activities or have a	section 501(h) elec	ction in eff	ect during the	tax					
	•	If "Yes," complete Schedule C, Par	•		47	_						
		organization a school as described i	le E	ļ.	48 49a	\perp						
49a b												
		s, was the related organization a solute this table for the organization's			(other than	officers direct	· [49b	and l			
	emple	oyees) who each received more than	n \$100,000 of comper	nsation from the or	rganization	. If there is non	e. ent	er "Non	anu r e "	еу		
			(b) Title and average	(c) Reportable	(d) ⊦	lealth benefits,						
	(a) Na	ame and address of each employee paid more than \$100,000	hours per week	compensation	hanafit r	itions to employee plans, and deferred		timated ai er comper		of		
			devoted to position	(Forms W-2/1099-MIS		ompensation						
										_		
_					_					_		
												
										_		
f	Total	number of other employees paid ov	er \$100,000 .	. ▶						_		
51	Comp	plete this table for the organization	's five highest compe	ensated independe	ent contrac	ctors who each	ı rece	ived mo	ore th	an		
	\$100,	000 of compensation from the orga	anization If there is no	one, enter "None "	·							
(a) N	ame ar	nd address of each independent contractor pa	aid more than \$100,000	(b) Type of	service	(c) Comp	ensation				
						- 				—		
										_		
						+				—		
d ·	Total	number of other independent contra	actors each receiving	over \$100 000	•							
		ie organization complete Schedule	J		ons and 49	47(a)(1)				_		
		cempt oharitable trusts must attach					▶ 🗸	Yes [] No			
		of perpury, I declare that I have examined this					nowledg	ge and be	lief, it is	3		
true, corre	ect, and	d controller Declaration of preparent of resident	officer) is based on all info	rmation of which prepai	rer has any kr	nowledge						
Cian		1 DIE				D. A.				_		
Sign Here		Signature of officer	N WEI			ZZ IUL	10	13				
i ici c		Type or print name and title	OONXC			NY TOO	VO	·		—		
D = ' - '		Print/Type preparer's name	Preparer's signature		Date		P	TIN		—		
Paid		yee proparer a name				Check L self-emplo						
Prepa Use O		Firm's name				Firm's EIN ▶				_		
U36 (ıııy	Firm's address ▶				Phone no				_		
May the	IRS	discuss this return with the prepare	shown above? See u	nstructions			ightharpoons	Yes [7 No	_		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2011

OMB No 1545-0047

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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Department of the Treasury Internal Revenue Service

 Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of organization **Employer identification number UAW OHIO STATE POLITICAL CONTRIBUTING ENTITY** 20-8708883 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures 3 Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No Yes 4a Was a correction made? No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . 3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL, Yes No Did the filing organization file Form 1120-POL for this year? ... Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (c) EIN (d) Amount paid from (e) Amount of political (b) Address (a) Name filing organization's contributions received and funds If none, enter -0promptly and directly delivered to a separate political organization If none, enter -0-(1) (2)(3)(4)(5)(6)

Schedule C (Form 990 or 990-EZ) 2011

Рa	till-A Complete if the organiza	ition is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	ection under		
	section 501(h)).	bolonge to an a	ffiliated group (a)	nd list in Part IV	each affiliated or	oup member's		
A	Check ► ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)							
В	Check ► ☐ if the filing organization checked box A and "limited control" provisions apply							
	Limits on L		(a) Filing	(b) Affiliated				
	(The term "expenditures		<u> </u>		organization's totals	group totals		
1	, , ,							
	b Total lobbying expenditures to influe		ody (direct lobbyin	g)				
	c Total lobbying expenditures (add line	es 1a and 1b)						
	d Other exempt purpose expenditures					· · · · · · · · · · · · · · · · · · ·		
	Total exempt purpose expenditures		•	a table in both				
•	f Lobbying nontaxable amount Ent columns	er the amount t	rom the following	g table in both				
	If the amount on line 1e, column (a) or (t) is: The lobbying	nontaxable amoun	it is:				
	Not over \$500,000	20% of the ar	nount on line 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000	************	A COLON		
	Over \$1,000,000 but not over \$1,500,000		10% of the excess					
	Over \$1,500,000 but not over \$17,000,000		5% of the excess of	ver \$1,500,000				
	Over \$17,000,000	\$1,000,000				83565 TREMANDE APPL		
		Grassroots nontaxable amount (enter 25% of line 1f)						
	Subtract line 1g from line 1a If zero or less, enter -0-							
	Subtract line 1f from line 1c If zero or less, enter -0-							
	j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No							
	(Some organizations that	-Year Averaging I made a section 5 w. See the instruc	01(h) election do	not have to com		•		
	Lobby	ing Expenditures	During 4-Year A	veraging Period				
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total		
2	Lobbying nontaxable amount							
t	Lobbying ceiling amount (150% of line 2a, column (e))			Average States				
	Total lobbying expenditures							
	Grassroots nontaxable amount							
•	Grassroots ceiling amount (150% of line 2d, column (e))			and the second s				
f	Grassroots lobbying expenditures							

Part	Complete if the organization is exempt under section 501(c)(3) and has NOT f (election under section 501(h)).	iled	Form	า 5768		
		(-	a)		(b)	
	ch "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description lobbying activity	Yes	No	Aı	nount	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
a b c	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					
d e f g	Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?					
h ı j	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i	lío				
2a b c d	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		A .			
Part		(5),	or se	ction		
1 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?	(5),	or se	1 2 3 ction	Yes	No
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OF answered "Yes."				ine 3	3, IS
1 2	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of	1			
a b c	Current year Carryover from last year Total		2a 2b 2c			
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year?		3			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
1 Also	Supplemental Information ete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, F, complete this part for any additional information ule C, Part I-A, Line 1 - AN ENTITY THAT MAKES POLITICAL CONTRIBUTIONS AND EXPENDITURES	Part I	I-A, ar	nd Part	II-B, I	line

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

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Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Name of the organization	Employer identification number
UAW OHIO STATE POLITICAL CONTRIBUTING ENTITY	20-8708883
DAW ONIO STATE I DEMONE DOMINIOSCINIO ENTIT	
	•••••••••••••••••••••••••••••••••••••••

Schedule O, Statement 2

UAW OHIO STATE POLITICAL CONTRIBUTING ENTITY

20-8708883

Form 990-EZ

Page 1

Line Number Part I Line 16

Other Expenses Structured Explanation

Description	Amount
POLITICAL CONTRIBUTIONS	31,120
Total	31,120